

1940

No. 1**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

William M Tighe

Name of deceased

Katherine A ^{Lavelle} Hawes

Age

77

years

10

months

days

Place of death

Main St

Date of death

Jan 2. 1940

Cause of death

Carcinoma of Uterus

Interment at

Rural

Date permit issued

Jan 3. 1940

Certified by

Frank J Piper

M.D.

No. _____

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Katherine A. Lovelle } HawesIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)on January 4, 1940.Certified by Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Orving H. Harper

Name of deceased

Catherine D. Leary

Age

71

years

months

days

Place of death

Laticliff Rd., Southboro

Date of death

Jan. 5, 1940

Cause of death

myocarditis, chr.
arteriosclerosis, chr.
carcinoma, breast

Interment at

St. Luke's Cemetery, Southboro

Date permit issued

Jan. 7, 1940

Certified by

Roland S. Newton M.D.

No. 2**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Catherine M. LearyIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat St. Luke's Cem., Westboro
(Name of cemetery or crematory)on Jan. 8, 1940Certified by (Rev.) J. E. Doherty
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Sumner C. GageName of deceased Caroline Lois (Ball) WilliamsAge 93 years 6 months 21 daysPlace of death Main St., SouthboroDate of death 2-10-40Cause of death Coronary Occlusion of heart
Arterio SclerosisInterment at Rural Cemetery - SouthboroDate permit issued 2-12-40Certified by C. W. Smith M.D.

No. 4

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Caroline Lois (Ball) Williams

If a U. S. War Veteran, specify what war, organization,
etc. _____

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)

on February 14, 1940.

Certified by Walter M. O'Hall
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 5**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to William M. TighName of deceased Caroline (Orlando) GouldAge 74 years ☒ months ☒ daysPlace of death Boston Rd SouthboroDate of death Feb 15, 1940Cause of death Coronary SclerosisInterment at Rural SouthboroDate permit issued Feb 16, 1940Certified by Walter F. Mahoney M.D.

No. 5**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Caroline (Orthank) GouldIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)on February 17. 1940.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

John J. Brown

Name of deceased

Elizabeth H. Daughan

Age

72

years

3

months

-

days

Place of death

Laticuama Rd. Southboro

Date of death

March 8 - 1940

Cause of death

Broncho Pneumonia

Interment at

Rural Cemetery

Date permit issued

March 9/1940

Certified by

J. Merrill Olson M.D.

No. 8**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased Elizabeth H. Daughan

If a U. S. War Veteran, specify what war, organization,

etc. _____

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on March 10, 1940.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

William M. Figh

Name of deceased

Infant Bay Borszcz

Age

years

months

days

Stillborn

Place of death

Turnpike Rd. Trayville

Date of death

Feb 27. 1940

Cause of death

Stillborn

Interment at

Rural Southern

Date permit issued

Feb 27. 1940

Certified by

Peter P. Cottone

M.D.

No. 6**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased Infant Boy BerszczIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Southboro, Mass.

(Name of cemetery or crematory)

on April 16, 1940Certified by Walter M. C. Hall

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

J. F. Callanan & Son

Name of deceased

William O'Brien

Age

76

years

— months

— days

Place of death

(Southview Rd) Southview

Date of death

March 2, 1940

Cause of death

Coronary Sclerosis

Interment at

St John's Hopkinton

Date permit issued

March 3, 1940

Certified by

Walter F. Mahoney

M.D.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to David Judge & Son
Name of deceased Hattie Humphrey
Age 95 years 2 months 6 days
Place of death Southboro Mass.
Date of death March 9. 1940
Cause of death Chronic Myocarditis
Interment at Woodlawn (Ennis Mass)
Date permit issued March 10. 1940
Certified by _____ M.D.

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Hattie HumphreyIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its terms

at _____

(Name of cemetery or crematory)

on _____

Certified by QVC

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 10**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Samuel C. GageName of deceased Mrs Addie LaddAge 70 years 5 months 12 daysPlace of death Cordaville Rd. SouthboroDate of death April 1940Cause of death Myocarditis chronicInterment at Springvale Cemetery (Sampford)
(Maine)Date permit issued April 21 1940Certified by Dr. Roland Newton M.D.

No. 12**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Albert J. Lavery

Name of deceased Alfreda Velroi (Cheney) Andrews

Age 76 years 11 months 21 days

Place of death Greenville N.H.

Date of death April 21 1940

Cause of death Cerebral Hemorrhage

Interment at Rural Cemetery

Date permit issued April 23 1940

Certified by H. E. Karr Greenville N.H. M.D.

No. 13**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Alfred Velvick (Cheney) AndrewsIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural, Southboro,
(Name of cemetery or crematory)on May 23, 1940.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL PERMIT

Greenville, N. H., April 22, 19 40
Permission is hereby given Albert J. Lavery
to remove the remains of Alfreda Velroi (Cheney) Andrews
from Greenville, N.H.
to Southboro, Mass. for interment in
Cemetery, April 23., 1940
Date of Death, April 21, 1940 Age 76 years, 11 months, 21 days.
Place of Death, Greenville, N.H. No.
Street, Hubbard Road Ward,
Cause of Death, Cerebral hemorrhage
Contributing Cause, Cerebral Arterio Sclerosis
Medical Attendant, H. E. Karr, M. D.

This permit does not in any way release the undertaker, or person acting as such, from the requirements of the regulations of the State Board of Health governing the transportation of corpses, or from the rules or orders issued by the boards of health for the protection of the public against infectious and contagious diseases.

No. 4 *Larry Lavery* Local Registrar.

THIS CERTIFIES that the conditions of this Permit have been
lawfully complied with.

Albert J. Lavery, Undertaker.
[over]

No. 14**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Winthrop G. PackardName of deceased William F. LovellAge 79 years 10 months 23 daysPlace of death Albany St.Date of death May 1, 1940Cause of death Chronic Deformed Lumbar
vertebrae 3 yearsInterment at Riverside MortuaryDate permit issued May 1, 1940Certified by William F. Byrne M.D.

No. 14**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased William L. LovellIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat Ridgeland Watertown

(Name of cemetery or crematory)

on May 3 - 1940Certified by Sam D. Horton

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 7**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased _____

If a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat St John's Hospital

(Name of cemetery or crematory)

on May 11 1940Certified by James H O'Brien

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

J. A. Coolson

Name of deceased

Groce B. Kennedy

Age

69

years

2

months

days

Place of death

Central St. Jayville

Date of death

May 20, 1940

Cause of death

General arteriosclerosis &
Diabetes Mellitus

Interment at

Fund Cemetery - Southboro

Date permit issued

May 23, 1940

Certified by

Raymond A. Johnson M.D.
Southboro, Mass.

No. 10**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased Grace W. KennedyIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on May 23, 1940.Certified by Kate M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 16**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Vernon E. MorrillName of deceased Dorothy O. FullerAge 77 years - months 11 daysPlace of death Oak Hill RoadDate of death June 3, 1940Cause of death Carcinoma of LiverInterment at Rural-SouthboroDate permit issued June 4, 1940Certified by Gane M.D.ashland

No. 16

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Southboro - Mass
(Office issuing permit)

City or Town of _____ Mass.

Name of deceased Denah O Fuller

If a U. S. War Veteran, specify what war, organization,
etc. _____

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its terms

at RURAL CEMETERY- SOUTHBORO, MASS.
(Name of cemetery or crematory)

on JUNE 6, 1940.

Certified by Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Irving N. Harper

Name of deceased

Ellen J. Cederholm

Age

69

years

11

months

17

days

Place of death

Southboro, Mass.

Date of death

June 6, 1940

Cause of death

Myocarditis, Chronic
Arteritis, Chronic
Asthma, Bronchial

Interment at

Forest Hills Crematory

Date permit issued

June 6, 1940

Certified by

Galand S. Newton M.D.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

J. S. Waterman & Sons
Boston Mass

Name of deceased

Florence H. Barber

Age

75 years 7 months 10 days

Place of death

Cordaville Rd Southboro

Date of death

July 10 - 1940

Cause of death

Cardiac Decompensation

Interment at

Rural Cem. Southboro

Date permit issued

July 10 - 1940

Certified by

T. J. Carnicelli M.D.

No. 18**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Florence H. BarberIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat RURAL CEMETERY, SOUTHBORO, MASS.
(Name of cemetery or crematory)on JULY 12, 1940.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 19**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Walter M. OffuttName of deceased (Baby) BarberAge — years — months — daysPlace of death ScitstonDate of death —Cause of death —Interment at Rural CemeteryDate permit issued July 11, 1940Certified by — M.D.

No. 19**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health

(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased

(Baby) BarberIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat Rural Cemetery, Southboro

(Name of cemetery or crematory)

on July 11, 1940Certified by Halter M. Gifford

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



OFFICE OF
THE CEMETERY COMMISSIONERS
SOUTHBOROUGH, MASSACHUSETTS

July 11, 1940

Board of Health,
Southboro, Mass.

Gentlemen: Attn. - Mr. James Telfer.

Will you please issue a permit to disinter,
remove and reinter the remains of (Baby) Barber,
from the Grave now occupied to a new location in
the Barber lot.

We have received authorization for this
transfer from the legal custodian of the remains.

Very truly yours,

THE CEMETERY COMMISSIONERS

By *Walter M. Offutt*
Walter M. Offutt, Supt.

No. 20**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to J. F. Callanan & Son.Name of deceased Daniel E. O'NeillAge 67 years — months — daysPlace of death Cordaville MassDate of death July 13, 1940Cause of death Coronary SclerosisInterment at St. James Hopkinton Mass.Date permit issued July 13, 1940Certified by William B. Clapp, M.D.
No Grafton Mass.

No. 20**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Daniel E. O'NeillIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat St. Johns Cemetery
(Name of cemetery or crematory)on July 15, 1940Certified by J. J. O'Brien
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 21**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to David Fudge & Son IncName of deceased Mary L. FaylesAge 43 years 1 months 5 daysPlace of death Southboro, MassDate of death July 27, 1940Cause of death Bronchial pneumonia
Carcinoma of Breast.Interment at Adams Ctr, N. Y.Date permit issued July 30, 1940Certified by Lee G. Thibault M.D.

No. 22**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Sumner C. GageName of deceased Soren Lukke JensenAge 90 years 4 months 0 daysPlace of death Newton St.Date of death August 8, 1940Cause of death ArteriosclerosisInterment at Rural CemeteryDate permit issued Aug. 8, 1940Certified by Clyde Murice M.D.

No. _____

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Soren L. JensenIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat RURAL CEMETERY, SOUTHBORO, MASS.
(Name of cemetery or crematory)on August 11, 1940.Certified by Walter M. Offutt,
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Waldo Burnett Fay

Age

81

years

10

months

1

days

Place of death

Southington Mass.

Date of death

Oct 16, 1940

Cause of death

Pulmonary Edema

Interment at

Rural Cemetery

Date permit issued

Oct 17, 1940

Certified by

Hugh Folsom

M.D.

No. 23**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Waldo Burnett FayIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on October 18, 1940.Certified by Walter H. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1940

No. 25**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Clarence B. Huff

Name of deceased

Carrie S. Cantello

Age

85

years

7

months

29

days

Place of death

Hebron Maine

Date of death

Nov 7, 1940

Cause of death

Coronary occlusion
arteries sclerosis

Interment at

Rural Cemetery

Date permit issued

Nov 7, 1940

Certified by

D. M. Stewart

M.D.

STATE OF MAINE

BURIAL PERMIT

Wheeler

Me.,

Nov. 6, 1948

Permission is hereby given

Clarence B. Huff

to remove and bury the remains of Carrie S. Cantello

in Cemetery, Town of Southboro Mass,

Date of Death Nov. 7, 19. , Age 86 years 9 months 29 days

Place of Death Wheeler Me., Street

Cause of Death Coronary occlusion

Arteriosclerosis

Medical Attendant H. M. Stewart

No. 123 E. E. Johnson City or Town Clerk

(Over)

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Carrie S. CantelloIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery
(Name of cemetery or crematory)on November 7, 1940Certified by Walter M. Coffey
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 25**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Martha (Wilson) Whitehorn

Age

88

years

4

months

10

days

Place of death

Main Street

Date of death

Dec, 27, 1940

Cause of death

Arterio-sclerosis general

Interment at

Rural

Date permit issued

Dec 28, 1940

Certified by

M.D.

No. 25**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Martha (Wilson) WhitehornIf a U. S. War Veteran, specify what war, organization,
etc. _____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on December 29, 1940.Certified by Valta M. Offutt,
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 1**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Wm. A.

Name of deceased

Clayton L. Slade

Age

19

years

months

days

Place of death

(83)

Windsor Pl. N.Y. City

Date of death

Dec. 29, 40

Cause of death

Coronary

Interment at

Rural Cemetery

Date permit issued

January 1, 1941

Certified by

Otto K. Pozdena

M. D.

Windsor Pl. N.Y. City

No. 27

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board Of Health
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Clayton R. Glade

If a U. S. War Veteran, specify what war, organization,
etc. _____

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this
permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on January 3, 1941.

Certified by Halter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. **25757**DEPARTMENT OF HEALTH OF THE CITY OF NEW YORK
BURIAL OR CREMATION PERMIT

This permit must be handed to the keeper of the Cemetery or Crematory by the Funeral Director in charge of the funeral.

New York, 12/30/40

The Certificate of Death having been furnished to this Department, as required by the Sanitary Code, permission is hereby given to Mr. A. Lange of 361 7 Ave

to remove the remains of Blayton L. Slade Aged 19 Yrs. 7 Mo. 19 Days,

who died at 183 Wenden Pl Borough of Queens

City of New York, on 12/24/40, 1940, from the

Cremation* For Burial* at Burial Chap. South Brook on Jan 1/41

Cause of Death Acromegaly Mass M.D.

Assistant Registrar of Records.

* Cross out one.

Per

No. 2

1941.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Summer C. Gage

Name of deceased Harold W. Stivers

Age 43 years 5 months 27 days

Place of death Southboro Mass

Date of death January 27-1941

Cause of death Alcoholic - Leukemia

Interment at Rural Cemetery

Date permit issued January 29-1941

Certified by J. Merrill Olson M. D.

No. 21941**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Harold W. Stivers

If a U. S. War Veteran, specify what war, organization, etc.

World War. Navy**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on January 29, 1941Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 3**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Wm. M. TigheName of deceased Mary F. FitzgeraldAge 27 years — months — daysPlace of death Southboro MassDate of death January 29, 1941Cause of death Chronic-Vascular Nephritis
& hypertensionInterment at Rural CemeteryDate permit issued January 30, 1941Certified by Hugh Folsom. M. D.

No. 3**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Mary F. Fitzgerald

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on February 1, 1941.Certified by Halter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 4.**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Irving W. HarperName of deceased John SparrowAge 86 years 6 months 18 daysPlace of death (Southville) Southboro MassDate of death Feb. 1, 1941Cause of death myocarditis, chronic
arteriosclerosis, chronic
broncho pneumoniaInterment at Rural CemeteryDate permit issued February 3, 1941Certified by Roland S. Newton M. D.

No. 4.**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass. Mass.Name of deceased John Sparrow

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on February 4, 1941.Certified by Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 5**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Sumner C. GageName of deceased Isabelle L. (Kinlock) OnthankAge 79 years 7 months 12 daysPlace of death (Fayville) Southboro, Mass.Date of death Feb. 5, 1941Cause of death Coronary SclerosisInterment at Rural CemeteryDate permit issued Feb. 6, 1941Certified by Walter F. Mahoney M. D.

No. 5**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Isabelle L (Kinlock) Onthank

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on February 7, 1941.

Certified by

Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No.

6

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

John J. Brown

Name of deceased

Mary J. (Reynolds) Dee

Age

68

years

11

months

—

days

Place of death

Fayville Mass.

Date of death

February 1941

Cause of death

Coronary Sclerosis

Interment at

Rural Cemetery

Date permit issued

February 12 1941

Certified by

Walter F. Mahony

M. D.

No. 6**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass. Mass.Name of deceased Mary J. (Reynolds) Dee

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on February 13, 1941.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 7**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Richard J. Duddy

Name of deceased

William J. Cody

Age

39

years

months

days

Place of death

Queens Hospital Portland
Maine

Date of death

Feb 13 1941

Cause of death

Macrocytic Anemia

Interment at

Rural Cemetery

Date permit issued

Feb 16. 1941

Certified by

Francis M. Dooley
Portland Maine

M. D.

No. 7**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased William J. Cody

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on February 16, 1941.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

STATE OF MAINE

Form D
BURIAL PERMIT

PORTLAND

Me.,

2/13 1941

Permission is hereby given

to remove and bury the remains of

in

Cemetery, Town of

Date of Death

2/13 1941, Age 39 years — months — days

Place of Death

Queens Hospital Street

Cause of Death

Medical Attendant

Francis M. Hooley
John Smith

No.

City or Town Clerk

(Over)

1941

No. 8**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Summer C. Gage

Name of deceased

Edward F. Collins

Age

79

years

11

months

20

days

Place of death

Latisquama Road

Date of death

April 30, 1941

Cause of death

Sudden death presumably
coronary sclerosis

Interment at

Rural Cemetery

Date permit issued

April 30, 1941

Certified by

Walter F. Mahoney

M. D.

No. 8

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Health Department
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Edward Fay Collins

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

on May 2, 1941.

Certified by Marta M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No.

9

BURIAL ~~FOR~~ (REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

George Cranston

Name of deceased

Charles F. Maynard

Age

years

months

days

Place of death

Date of death

Cause of death

Interment at

Rushesett Memorial C.D.

Date permit issued

Certified by

(James Teefer)~~ME 51~~

1942

No.

33

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

George Cranston Funeral Director Winford R.I.

Name of deceased

W. M. Offutt. Charles F. Maynard.

Age

66

years

months

days

Place of death

Date of death

1914

Cause of death

Interment at

Quakeresset Memorial Cemetery R.I.

Date permit issued

May 16 1941.

Certified by

M. D.

No. 9**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass. Mass.Name of deceased Charles F. MaynardIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Quidnutt Memorial Cemetery
(Name of cemetery or crematory)on May 17, 1941Certified by Wilbur J. Reynolds Supt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No.

10

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

George Cranston

Name of deceased

Frank S. Maynard

Age

years

months

days

Place of death

Date of death

Cause of death

Interment at

Rudnessett Memorial R.I.

Date permit issued

Certified by

M. D.

1942

No.

31

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by office issuing permit

George Cranston Funeral Director Wickford
R.I.

Issued to

W. M. Offutt.

Name of deceased

Frank S. Maynard
Born 1876

Age

years

months

days

Place of death

Date of death

1876

Cause of death

Interment at

Quodresett Memorial Cemetery R.I.

Date permit issued

May 16, 1941

Certified by

M. D.

No. 10.**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass Mass.Name of deceased Frank S. MaynardIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Quidnert Memorial Cemetery
(Name of cemetery or crematory)on May 17, 1941Certified by Wilbur J. Reynolds Supt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 11**BURIAL (OR) (REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

George Cranston

Name of deceased

Frank M. Maynard.

Age

years

months

days

Place of death

Date of death

Cause of death

Interment at

Quidnessett Memorial R.D.

Date permit issued

Certified by

M. D.

1942

No.

32

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

*George Cranston Funeral Directors
& Walter D. Offutt.**Wiford R.I.*

Name of deceased

*Frank W. Maynard
(Born 1876)*

Age

5

years

months

days

Place of death

Date of death

1881

Cause of death

Interment at

Quadrissett Memorial Cemetery R.I.

Date permit issued

May 16, 1941.

Certified by

M. D.

No. 11**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass. Mass.Name of deceased Frank W. Maynard

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Quidnessett Memorial Cemetery
(Name of cemetery or crematory)on May 17, 1941Certified by Wilbur J. Reynolds Supt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

LAW OFFICES OF
TAYLOR & FOLEY

WILLIAM H. TAYLOR
DAVID A. FOLEY
JEREMIAH J. SULLIVAN
PAUL E. MURPHY
ALFRED W. HOWES

179 SUMMER STREET
BOSTON, MASS.

TELEPHONE LIBERTY 9240

March 19, 1941

Mr. James Telfer
Board of Health
Southborough, Massachusetts

Dear Jim:

According to the report of Dr. Francis M. Dooley of Portland, Maine, William J. Cody died of Macrocytic Anemia. Contributing causes of death were Chronic Cholecystitis, Splenitis, Pancreatitis and Seropurulent pleuritis.

Lawrence Misener asked me to send you this information.

Very truly yours,

Alfred W. Howes

RICHARD J. DUDDY
FUNERAL DIRECTOR
172 STATE STREET
PORTLAND, MAINE

Mr. J. F. Callanagh
34 Church St.
Hampden, Mass.

March 15, 1941

Dear Sir,

Received information from City Clerk
to-day, re William J. Cody. The report is
as follows:

Chronic Pan Creatitis
and Hemosiderosis.
Autopsy = Pyo-Thorax
& Streptococcus Infection.

Thanking you again for being
so patient. I remain
very truly yours,
Joseph R. Duddy

T. F. CALLANAN
FUNERAL DIRECTOR AND EMBALMER
TELEPHONE 6
34 CHURCH STREET
HOPKINTON, MASSACHUSETTS

March 18, 1941.

Mr. James F. Telfer,
Southboro, Mass.

Dear Sir:

Enclosed you will find the letter which I
received this morning from Portland, Maine. ~~that~~
Will you please write in the cause of death on the
burial permit?

I received a letter February 27th saying
the doctor who performed the autopsy was in the
hospital very ill himself and that as soon as he
was able to make his report they would send it
along.

Sorry for the delay but could not be
helped.

Yours truly,

T. F. Callanan.



OFFICE OF
THE CEMETERY COMMISSIONERS
SOUTHBOROUGH, MASSACHUSETTS

December 22, 1941

Mr. James F. Telfer,
Board of Health
Southboro, Mass.

Following are the names and dates of the bodies
removed from Rural Cemetery May 16, 1941 for re-
interment in a Rhode Island cemetery.

Frank S. Maynard - 1876-1876

Frank N. Maynard - 1879-1881

Charles F. Maynard 1848-1914

J. M. Coffey

1941

No. 12**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

John J. Brown

Name of deceased

Gertrude J. Goff

Age

76

years

—

months

—

days

Place of death

Southville Rd. Southboro Mass

Date of death

May 7, 1941

Cause of death

Cerebral Hemorrhage

Interment at

Burial

Date permit issued

May 8, 1941

Certified by

W. J. Cochrane

M. D.

No. 12**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Health Dept.

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Gertrude Jane Goff.

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on May 9, 1941Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 13

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Thomas P. Callanan & SonName of deceased Margaret J. FitzgeraldAge 75 years — months 21 daysPlace of death (Cordaville) SouthboroDate of death May. 23-1941Cause of death Cerebral HemorrhageInterment at St Johns-HopkintonDate permit issued May. 25. 1941Certified by Walter Mahoney M. D.

No. 13**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.

Mass.

Name of deceased Margaret J. Fitzgerald

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St John's Hopkinton

(Name of cemetery or crematory)

on May 26 1971Certified by James W. Brown

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 14**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

John T. Rowe

Name of deceased

James McGovern

Age

10

years

11

months

26

days

Place of death

Southboro Mass.

Date of death

June 19, 1941

Cause of death

Accidental Drowning

Interment at

Del Park Cemetery *Natick*

Date permit issued

June 20, 1941

Certified by

Walter F. Mahoney M. D.

No. 14**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased James M. Govern

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Dell Park Cemetery
(Name of cemetery or crematory)on June 21, 1941Certified by M. S. Wilson
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



1941

No. 15**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Henry Joseph Clapp

Age

75

years

11

months

13

days

Place of death

W. Main St., Southboro

Date of death

July 4, 1941

Cause of death

Heart disease probably
coronary occlusion

Interment at

Mount View Cem., Shrewsbury

Date permit issued

July 5, 1941

Certified by

Frederick W. Guild
Grafton Mass.

M. D.

No. 15**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Henry Joseph ClappIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mountain View Cemetery
(Name of cemetery or crematory)on Monday July 7, 1941Certified by Walter H. Mason, Supt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 16**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

B. A. & C. E. Tripts

Name of deceased

Charles F. Hayes

Age

87

years

4

months

16

days

Place of death

Southboro Mass.

Date of death

July 8. 1941

Cause of death

Myocarditis Chronic
Arterio Sclerosis Chronic

Interment at

Woodbrook Cemetery Woburn

Date permit issued

July 9. 1941

Certified by

Reiland S. Hewton

M. D.

No. 16**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Charles F. Hayes.If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Woodbrook Cemetery Woburn Mass.

(Name of cemetery or crematory)

on July 11, 1941Certified by E. Leo Loherty

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 17

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to William T. BulgerName of deceased George A. MooneyAge 55 years — months — daysPlace of death (Southville) SouthboroDate of death July 10. 1941Cause of death Coronary Thrombosis
Generalized Arterio SclerosisInterment at Holy Cross Cemetery Malden.Date permit issued July 11. 1941Certified by James Walsh M. D.

No. 17**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased George A. Mooney

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

HOLY CROSS CEMETERY**MALDEN, MASS.**

at

(Name of cemetery or crematory)

on July 14, 1941Certified by Joseph J. Walsh

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

Supt.

1941

No. 18**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Matthias Hollander

Name of deceased

Paul Otenti

Age

44

years

months

days

Place of death

New York City

Date of death

Aug. 10 - 41

Cause of death

Drowning

Interment at

Rural Cemetery

Date permit issued

Aug. 15 - 1941

Certified by

M. D.

No. 18**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Paul Otenti

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on August 15, 1941.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No. 19**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

John J. Brown

Name of deceased

Peter J. McDutty

Age

47

years

months

days

Place of death

Marlboro Rd. Southboro

Date of death

Aug. 26, '41

Cause of death

Trac. Skull Auto Accident

Interment at

Immaculate Conception

Date permit issued

Aug. 27, '41

Certified by

Walter F. Mahoney M. D.

No. 19**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Broad St. Church

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Peter Joseph McIntyre

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Immaculate Conception Cemetery, Marlboro

(Name of cemetery or crematory)

on August 28, 1941Certified by John J. Fletcher

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No.

20

Remove from
Lot No 6 sec 15 to Lot 50 sec 3.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Walter M. Offutt

Name of deceased

Margaret E. (Thompson) Onthank

Age

47

years

months

days

Place of death

Date of death

Feb 17. 1939

Cause of death

Remove remains from Lot No 6 Sec. 15 to
Lot No 50 Sec 3

Interment at

Rural Cemetery

Date permit issued

Oct 4. 1941

Certified by

M. D.

No. 20

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board Of Health

(Office issuing permit)

City or Town of Southboro, Mass. Mass.

Name of deceased Margaret E. Thompson Onthank

If a U. S. War Veteran, specify what war, organization,
etc. _____

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.

(Name of cemetery or crematory)

on October 6, 1941.

Certified by

Walter M. O'Flaherty
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



OFFICE OF
THE CEMETERY COMMISSIONERS
SOUTHBOROUGH, MASSACHUSETTS

October 4, 1941

Board of Health
Southboro, Mass.

Gentlemen:

Attn: Mr. James Telfer

Will you please issue a Removal Permit, to the undersigned , for the removal of the remains of Margaret E. (Thompson) Onthank from Lot No. 6, Section 15, and to remove the same to and reinter said remains in Lot No. 50, Section 3.

Authorization for this transfer has been received from the legal custodian of the remains.

Very truly yours,

THE CEMETERY COMMISSIONERS

Walter M. Offutt
By: Walter M. Offutt, Supt.

1941

No.

22

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

F. A. Carlson

Name of deceased

Louis H. Harrington

Age

69

years

—

months

—

days

Place of death

Miami Fla.

Date of death

10-31-41

Cause of death

Interment at

Rural Cemetery

Date permit issued

Nov. 8. 1941

Certified by

Geo. H. MacDonald Dade County
Miami M. D.

No. 22**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Louis H. Harrington

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on November 8, 1941.Certified by Hester M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

BURIAL - REMOVAL - TRANSIT PERMIT

Place of Death:

FLORIDA STATE BOARD OF HEALTH

County Dade

BUREAU OF VITAL STATISTICS

Precinct

City or Town MIAMI

NUMBER OF PERMIT 2079

Name of Deceased LOUIS H. HARRINGTON

Age 69 Sex M Color Wh

Date of Death 10-31-, 19 41

Name of Cemetery or Crematorium South Borough Cemetery

Removal to: City Boston

State Mass.

I hereby certify that I have prepared for burial or other disposition, the body of the above named deceased strictly in accordance with the laws of the State of Florida and the Rules and Regulations of the State Board of Health of Florida governing the disposition of dead human bodies.

Firm Name John J. Skillman Funeral Home

(Signature) [Signature] License No. 128

(FUNERAL DIRECTOR)

A death certificate having been filed in my office, permission is hereby granted for the burial, transportation, ~~cremation or~~ ~~interment~~ ~~in~~ ~~the~~ ~~body~~ ~~of~~ ~~the~~ ~~above~~ ~~named~~ ~~deceased~~.

GEO. N. MACDONELL, M.D.

(Signature) Local Registrar

If the body is embalmed, the licensed embalmer is required to file an affidavit with the local registrar before Burial-Removal-Transit Permit is issued.

The Burial-Removal-Transit Permit must be delivered by the undertaker to the sexton or other person in charge of the cemetery where burial takes place. This Permit must be endorsed by the sexton and delivered within ten days to the local registrar of the district in which burial takes place. If there is no sexton in charge of cemetery, the undertaker or person acting as such shall sign the Permit as sexton, write across the face of Permit the words, "No person in charge" and return Permit to local registrar.

Body was _____ on _____, 19____, in

(STATE WHETHER BURIED, CREMATED OR PLACED IN RECEIVING VAULT)

Cemetery _____ City _____ State _____

(Signature) _____

(SEXTON OR PERSON IN CHARGE)

If Body is to be Shipped, fill out the spaces below:

Shipping Station Miami, Florida, for Either Name of Cemetery

(STATE WHETHER BURIAL OR CREMATION)

(if obtainable) South Borough at Boston State Mass.

Consigned to _____ Address _____

I hereby certify that I permitted the shipment of the above named deceased this _____ day of _____, 19____

(Signature) [Signature]

(TICKET AGENT OR BAGGAGEMAN OR EXPRESS AGENT)

Name of Transportation Company _____

NOTE: ONLY THE LOCAL REGISTRAR (DEPUTY OR SUB-REGISTRAR) MAY ISSUE A BURIAL - REMOVAL - TRANSIT PERMIT

1941

No.

21

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Melora Fayett ^(Smith) Randall

Age

85

years

5

months

21

days

Place of death

(Cordaville) Southboro

Date of death

Oct 22-41

Cause of death

Myocarditis Chronic

Interment at

Center Cemetery Wareham

Date permit issued

Oct 22-41

Certified by

Roland Newton

M. D.

No.

BURIAL (OR REMOVAL) PERMIT*This Coupon to be returned immediately, properly endorsed,*to..... **Board of Health**
(Office issuing permit)City or Town of..... **Southboro**..... **Mass.**Name of deceased .. **Mary A. Dunn**If a U. S. War Veteran, specify what war, organization, etc.
.....**ENDORSEMENT***(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat .. **Inmac. Society Cem.** ..
(Name of cemetery or crematory)on .. **Sep 20, 1947**Certified by .. **J. Glennon** ..
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1941

No.

23

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

J. A. Cookson

Name of deceased

George Campbell

Age

84

years

3

months

3

days

Place of death

(Fayville) Southboro Mass.

Date of death

November 28, 1941

Cause of death

Fall Fruit Hips

Interment at

Melrose Cemetery Brockton

Date permit issued

Dec 1, 1941

Certified by

Walter F. Mahoney.

M. D.

(1941)

No. 24**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Summer C. Gage

Name of deceased

George H. Henderson

Age

82

years

5

months

25

days

Place of death

20 Pitman St., Providence, R.I.

Date of death

Dec. 12, 1941

Cause of death

Cerebral Hemorrhage

Interment at

Rural Cemetery

Date permit issued

Dec 13, 1941

Certified by

M. D.

No. 24**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased George H. HendersonIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on Dec. 14, 1941.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

REMOVAL OR BURIAL PERMIT.

The Sexton must indorse the back of this permit and return it to the City Registrar where the burial takes place on or before the fifth day of the month next succeeding.

OFFICE OF CITY REGISTRAR, PROVIDENCE, R. I.

DEC 12 1941

PERMISSION IS HEREBY GIVEN TO REMOVE THE BODY OF

George Henry Henderson for burial at *Southboro Mass*

Date of Death *Dec 12 1941* Age *82* years *5* months *25* days

Place of Death *20 Pitman St* Providence, R. I.

Cause of Death *Cerebral Hemorrhage*

Funeral Director *J H Williams & Co*

Michael J. Nestor

City Registrar

No. 21**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.

Name of deceased _____

If a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Center Cemetery
(Name of cemetery or crematory)on Oct 23 - 1941Certified by W. H. Hathaway
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

26

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Summer C. Gage

Name of deceased

Telford F. Babb.

Age

46

years

9

months

1

days

Place of death

Southboro Mass.

Date of death

April 11, 1942

Cause of death

Carcinoma lungs and
adjacent tissue

Interment at

burial Mt Auburn, Cambridge

Date permit issued

April 1942

Certified by

Roland Newton
Westboro, Mass

M. D.

(1942)

No. 2726**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board Of Health
(Office issuing permit)City or Town of Southton Mass.Name of deceased Telford F. Babb.If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Mount Auburn Cemetery
(Name of cemetery or crematory)on April 15, 1942Certified by Herbert C. Philpott.
(Signature of Superintendent, cemetery or crematory) D.L.

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 25**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to F A CooksonName of deceased Anne Otis EatonAge 79 years 7 months 15 daysPlace of death SouthboroDate of death April 7 1942Cause of death myocardial infarctionInterment at Barre Hill Mass.Date permit issued April 9 1942

Certified by _____ M. D.

1942

No.

29

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to William M. TigheName of deceased Margaret H. MeloyAge 87 years 10 months 14 daysPlace of death Boston Rd SouthboroDate of death April 25, 1942Cause of death Dehydration ^{due} to Intestinal ObstructionInterment at Rural cemetery SouthboroDate permit issued April 25 1942Certified by Hugh Folsom M. D.

(1942)

No. 22
22**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Margaret H. Malery

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on April 27, 1942.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

28

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Fredrick A. CooksonName of deceased Barbara Walker (Fennell)
M. CauslandAge 76 years _____ months _____ daysPlace of death Southboro
Oak Hill Rd. Fagville Sct.Date of death 4-20-42Cause of death Myocardial Degeneration
non-rheumatic.
Chronic MyocarditisInterment at Hope Cemetery WorcesterDate permit issued Apr. 20, 1942Certified by Albert E. Lemarbe M. D.

No. 28**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Barbara W. 17th Cavsland

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Hope Cemetery.
(Name of cemetery or crematory)on APR 22 1942Certified by Oscar H. Burbank
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

2727

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

W. M. Tighe

Name of deceased

Ada (Harvey) Harris

Age

87

years

10

months

days

Place of death

Southboro Mass.

Date of death

April 11, 1942

Cause of death

Arterio sclerosis

Chronic Myocarditis

Interment at

Rural Cemetery

Date permit issued

April 13, 1942

Certified by

C. W. Smith

M. D.

No. 28**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southbor Mass.Name of deceased Ada (Harvey) Harris

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on April 14, 1942.

Certified by

Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

1942

No. 33

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Edw. L. Merrill

Name of deceased

Bertha (Hunter) Richardson

Age

67

years

5

months

6

days

Place of death

Main St Southboro

Date of death

May 21, 1942

Cause of death

Cerebral hemorrhage

Interment at

Brookside, Cem. Stow

Date permit issued

May 21, 1942

Certified by

David D. Sher

M. D.

No. 30**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass, Mass.Name of deceased Bertha RichardsonIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Brookside Cemetery
(Name of cemetery or crematory)on May 24 '42Certified by Alvin A. Fletcher
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

34

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Summer C. Gage

Name of deceased

Harry Winfield Gawn

Age

73

years

5

months

23

days

Place of death

Litisquama Rd.

Date of death

June 7, 1942

Cause of death

Fibrosarcoma of rt biceps with
metastases to lungs

Interment at

Rural Cemetery

Date permit issued

June 8, 1942

Certified by

David L. Sher
Marlboro

M. D.

No. 34**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Harry Winfield Sawin

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on June 9, 1942.Certified by Walter M. O'Sullivan

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

35

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Frank J. Foley

Name of deceased

Frederick Andrew Carpenter

Age

66

years

6

months

22

days

Place of death

Keene N.H.

Date of death

June 8, 1942

Cause of death

Interment at

Rural Cemetery

Date permit issued

June 11, 1942

Certified by

M. D.

No. 35

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health

(Office issuing permit)

City or Town of Southborough, Mass.

Name of deceased Frederick Andrew Carpenter

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on June 11, 1942,

Certified by

Nathan M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

NEW HAMPSHIRE



BURIAL--TRANSIT PERMIT

Burial Permit No.

City or
Town of Keene

PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

Full name of deceased Frederick Andrew Carpenter

Place of death Keene Cheshire New Hampshire

(Town or City) (County) (State)

Date of death June 8 19 42 Color White Sex Male Age 66-8-22

Method of disposal Burial Rural Cemetery (Yr. Mo. Days)

(Whether burial, cremation, transportation, storage, etc.) (Cemetery or Crematory)

Town or City Southboro County Middlesex State Massachusetts

A certificate of death having been filed as required by the laws of this State, permission is hereby given to Frank J. Foley Address Keene, New Hampshire

(Funeral Director)

to dispose of body of said deceased as above stated.

Dated at Keene, New Hampshire this 10th day of June 19 42.

(Address)

Signature Elmer B. Chamberlain
(Town Clerk, Sub-Registrar, Agent City Board of Health)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was on 19 in
(State whether cremated, buried, stored, etc.) (Cemetery or Crematory)

Place Signature
(Sexton or person in charge)

Form BT-1

SEE OTHER SIDE

This permit after being signed by the Sexton or person in charge (or by the Funeral Director where there is no sexton) must be returned within six days to the Clerk of the town in which the burial takes place.

1942

No.

36

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

William M. Tighe

Name of deceased

Susan Maria Stone

Age

91

years

11

months

days

Place of death

Southboro Mass.

Date of death

June 22 - 1942

Cause of death

(Atherosclerosis)

Interment at

Rural Cemetery

Date permit issued

June 22 - 1942

Certified by

Fredrick D. Gould

M. D.

No. 36**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased Susan M. StoneIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on June 23, 1942Certified by Yakov M. Olf

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 37**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

John J. Brown

Name of deceased

William J. Bagley

Age

55

years

months

days

Place of death

Southboro Mass.

Date of death

July 7, 1942

Cause of death

Chr. Myocarditis

Interment at

Rural Cemetery

Date permit issued

July 9 1942

Certified by

Raymond G. Johnson

M. D.

No. 37**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased William J. Bagley

If a U. S. War Veteran, specify what war, organization, etc.

World War Co. B 10/149 pl. 260**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on July 9, 1942.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

38

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Harry W. Young

Age

70

years

9

months

4

days

Place of death

Southboro Laticquama Rd.

Date of death

July 10, 1942

Cause of death

Mitral regurgitation

Interment at

Rural

Date permit issued

July 11, 1942

Certified by

Roland S. Newton M. D.

No. 38**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Harry W. YoungIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on July 13, 1942.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

39

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

T. G. Callanan & Son
(Hyphintia)

Name of deceased

Clara A. O'Neill

Age

61

years

months

days

Place of death

Southboro

Date of death

July 16, 1942

Cause of death

Cancer of liver

Interment at

Rural Cemetery

Date permit issued

July 17, 1942

Certified by

Roland S. Newton

M. D.

No. 39**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Clara G. O'NeillIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on July 20, 1942.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 40**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Wm M Tighe

Name of deceased

Ellen (Goodman) Richards

Age

89

years

11

months

17

days

Place of death

Southern

Date of death

July 17 1942

Cause of death

Arterio Sclerosis

Interment at

Rural Cemetery

Date permit issued

July 17 1942

Certified by

C. W. Smith

M. D.

No. 40**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to _____
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Ellen Goodnow RichardsIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on July 19, 1942.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 41**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

F. A. Cookson

Name of deceased

Ida L. Hickley

Age

88

years

0

months

0

days

Place of death

Dorchester

Date of death

Aug 2, 1942

Cause of death

Sen. arteriosclerosis

Interment at

Forest Hills Boston

Date permit issued

Aug 3, 1942

Certified by

M. D.

No. 41**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Quincy Mass

Mass.

Name of deceased John L. Hinkley

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at

CREMATORY OF FOREST HILLS CEMETERY

(Name of cemetery or crematory)

on

AUG 4 - 1942**AUG 4 - 1942**Certified by Henry S. Adams

(Signature of Superintendent, cemetery or crematory)

per hit

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

42

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Wm M Tigue

Name of deceased

Lucella Chickering

ref
Barnes

Age

88

years

11

months

days

Place of death

Parkerville Rd

Date of death

Sept 16 1942

Cause of death

myocarditis chronic arterio sclerosis

Interment at

Rural Southern

Date permit issued

Sept 19 1942

Certified by

Roland Newton

M. D.

No. 42**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased

Lucella Chickering ^{nee} Pennison

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.

(Name of cemetery or crematory)

on September 20, 1942.

Certified by

Katherine M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

43

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Edward Chester Wells

Age

66

years

9

months

6

days

Place of death

Flagg Rd

Date of death

October 3

Cause of death

Sudden death presumably
coronary sclerosis

Interment at

Rural Cemetery

Date permit issued

Oct 4, 1942

Certified by

Walter F. Mahoney

M. D.

No. 43**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Edward Chester WellsIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on October 5, 1942Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 44**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

F. A. Cookson

Name of deceased

Charles C. Lowell

Age

45

years

3

months

29

days

Place of death

Natick Mass.

Date of death

Oct. 13. 1942

Cause of death

Hemorrhage due to ruptured
varices of the stomach

Interment at

Rural Cemetery

Date permit issued

Oct. 16. 42

Certified by

Isadore Cohen F. D. M. D.
Station Hospital

No. 49**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Charles C. Rowell

If a U. S. War Veteran, specify what war, organization, etc.

World War 1 & 2**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

October 17, 1942

on _____

Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 47**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Buisson & Morin

Name of deceased

Charles H. Morin

Age

76 years 11 months 6 days

Place of death

Parkerville Rd.

Date of death

Nov. 2 - 1942

Cause of death

Arterio Sclerosis

Interment at

Rural Cemetery

Date permit issued

Nov. 3 - 1942

Certified by

Dr. G. E. LeMaire M. D.

No. 47

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)

City or Town of Southborough, Mass.

Name of deceased Charles H. Morin

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

on November 5, 1942

Certified by

Walter M. Offitt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

L'UNION SAINT-JEAN-BAPTISTE D'AMÉRIQUE

A FRATERNAL SOCIETY FOR AMERICANS OF FRENCH DESCENT



EXECUTIVE COMMITTEE
1937-1941

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EUGENE L. JALBERT, LEGAL ADVISER
WOONSOCKET, R. I.



HOME OFFICE: WOONSOCKET, R. I.

November 12, 1942

Mrs. Valérie Payne, Sec. 80,
104 River Street,
Hudson, Mass.

Dear Madam:

You will find enclosed death certificate of Charles H. Morin. You will notice that this document is not signed by the health officer nor the registrar; therefore, this certificate is not considered official. Please have this document signed by proper authorities, and return to this office.

We will not be able to comply with your wishes and return the death certificate to you. This document constitutes the official proof of a death and must remain in the office.

Thanking you for your cooperation in this case, we beg to remain,

Yours truly,

L'UNION SAINT-JEAN-BAPTISTE D'AMÉRIQUE

Per

Gertrude G. Theriault

BGH

1942

No. 48**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Wm m Tigh

Name of deceased

Lizzie E (Printiss) Hyde

Age

84

years

1

months

10

days

Place of death

Printiss St

Date of death

Nov 31942

Cause of death

Uremia

Interment at

Rural Swarth

Date permit issued

Nov 4. 1942

Certified by

Hugh Folsom

M. D.

No. 48**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.

Name of deceased

Lizzie E. {Prentiss} Flyck

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on November 5, 1942.

Certified by

Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 47**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Eleanor Telfer

Age

83

years

3

months

0

days

Place of death

E. Main St., Southboro

Date of death

Dec 4, 1942

Cause of death

Myocarditis chronic

Interment at

Rural Cemetery

Date permit issued

Dec 6, 1942

Certified by

Roland Newton

M. D.

Southboro Mass.

No. 49**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Southboro Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Eleanor TelferIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on December 7, 1942.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No. 50**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

H. L. Richardson

Name of deceased

48 Lafayette Park Lynn.
Kate (Caine) Scutou

Age

68

years

1

months

2

days

Place of death

Southboro Mass.

Date of death

December 27-1942

Cause of death

General Arterio Sclerosis
Hypertensive Heart Disease

Interment at

Swampscott Cemetery (Swampscott)

Date permit issued

December 27-1942

Certified by

R. A. Johnson. Weston M. D.
Mass

No. 50**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Foulton Mass

Mass.

Name of deceased Mate (Paine) SeatonIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Swampscott

(Name of cemetery or crematory)

on Dec 29th 1942Certified by Thomas Dandley Suff

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.

51

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Robert W. Schware

Age

81

years

6

months

16

days

Place of death

Southboro Mass.

Date of death

December 27-1942

Cause of death

Arterio Sclerosis (Heart)
(disease)

Interment at

Rural Cemetery (Southboro)

Date permit issued

December 27, 1942.

Certified by

Walter F. Mahoney

M. D.

Weston Mass.

No. 51**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass. Mass.Name of deceased Robert W. Schware.

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass
(Name of cemetery or crematory)on December 29, 1942Certified by Halter W. Offutt.

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 4**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to

Board of Health

(Office issuing permit)

City or Town of

Southboro

Mass.

Name of deceased

Miss Hannah G. Bayley

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.

(Name of cemetery or crematory)

on January 3, 1943.

Certified by

Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)Walter M. Offutt, Supt.

If there is no officer in charge, undertaker should sign and return this stub.

(1943)

No. 1

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Wm. M. Tighe

Name of deceased

Susan E. (Wann) Sanders

Age

89

years

—

months

—

days

Place of death

(Southville) Southboro Mass.

Date of death

Feb 15, 1943

Cause of death

Gen. Arterio Sclerosis (Arterio
sclerotic Heart disease)

Interment at

Rural Cemetery

Date permit issued

Feb. 15, 1943

Certified by

Walter F. Mahoney.

M. D.

(1943)

No. 1.**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro

Mass.

Name of deceased Susan E. Mann. Landis

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Entombed - to be interred elsewhere
in the Spring, (Rural Cemetery)at _____
(Name of cemetery or crematory)on February 17, 1943.Certified by Walter M. Offutt.

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

(1943)

No. 3

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Adelaide L. Krue

Age

68

years

10

months

8

days

Place of death

Main St.

Date of death

March 3, 1943

Cause of death

Myocarditis chronic

Interment at

Rural

Date permit issued

March 5, 1943

Certified by

Roland

Newton

M. D.

Westboro Mass

No. 3**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Delade L. WyeIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on March 6, 1943.Certified by Walter M. Offutt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. 5**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Geo. H. Gregg & Son

Name of deceased

Theodore Olson

Age

73

years

—

months

—

days

Place of death

Southboro

Date of death

Mar. 8, 1943

Cause of death

Carcinoma prostate gland

Interment at

Waketown, Mass.

Date permit issued

Mar. 8, 1943

Certified by

V. P. S. Newton

M. D.

No. _____

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to _____
(Office issuing permit)City or Town of Southboro (Southville) Mass.Name of deceased Theodore OlsonIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Ridgelaure Watertown
(Name of cemetery or crematory)on Feb 11 - 1943.Certified by Van A. Horton Supt.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

2.

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Vernon E. Morris (Hopkinton)

Name of deceased

Sarah A. Brett Leighton

Age

98

years

2

months

—

days

Place of death

Southboro Mass.

Date of death

Feb 14. 1943

Cause of death

Arterio Sclerotic Heart Disease

Interment at

Mt. Auburn Hopkinton Mass.

Date permit issued

Feb. 15. 1943.

Certified by

Walter F. Mahoney.

M. D.

No. 3**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass. Mass.Name of deceased Sarah A. Brew. Leighton.If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Int. Auburn Cemetery, Hopkinton, Mass.
(Name of cemetery or crematory)on April 30, 1943Certified by Albert E. Boyno
(Signature of Superintendent, cemetery or crematory) Caretaker

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. 7

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Irving H. Harper

Name of deceased

Ardell L. Stone

Age

87

years

11

months

10

days

Place of death

Southboro

Date of death

Mar 3, 1943

Cause of death

Arterio Sclerotic heart
disease

Interment at

Hampden, Maine

Date permit issued

March 5, 1943

Certified by

Walter F. Mahoney M. D.

1940

No.

6

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Wm M. Tye

Name of deceased

Ellen O'Connell Salmon

Age

70

years

months

days

Place of death

Lyman St Southbr

Date of death

March 13 1940

Cause of death

Mitral Regurgitation
Congestive Heart Failure

Interment at

Marble Mass

Date permit issued

March 15 1943

Certified by

F. J. Spellisay (Marble)

M. D.

1943

No.

2

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

John P. Rowe

Name of deceased

John J. Hogan

Age

70

years

months

days

Place of death

Bakers Rest Home

Date of death

April 13, 1943

Cause of death

Cerebral hemorrhage

Interment at

Immaculate Conception
mortuary

Date permit issued

April 15, 1943

Certified by

John F. Collins

M. D.

No. 7**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased John J. HoganIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Immaculate Conception Cemetery, Marlboro
(Name of cemetery or crematory)on April 16, 1943Certified by John J. Fletcher
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

8

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Sumner L. GageName of deceased Frederick Brown GleasonAge 90 years 7 months daysPlace of death Melndy Rest HomeDate of death May 1, 1943Cause of death BronchopneumoniaInterment at Maplewood Cemetery
Marlboro, Mass.Date permit issued May 1, 1943Certified by Roland Newton M. D.

No. 8**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Frederick B. GleasonIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Maplewood
(Name of cemetery or crematory)on May 4, 1943Certified by Gordon C. Hamilton
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No.

7th 9

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Vernon E. Merrill

Name of deceased

Eveline Bleasney (nee Blood)

Age

97

years

11

months

days

Place of death

Balser Rest Home Southboro

Date of death

May 19, 1943

Cause of death

Coronary Occlusion

Interment at

Arterio Sclerosis Mass.
Bellevue Laurens, Mass.

Date permit issued

May 19, 1943

Certified by

Roland S. Newton

M. D.

No. 9**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

James F. Telfer
to *Southboro, Mass.*
(Office issuing permit)

City or Town of _____ Mass.

Name of deceased *Emeline Bleakney (nee Blood)*If a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at *Billerica*
(Name of cemetery or crematory)

on *May 22, 1943*

Certified by *John A. Crouse, Supt.*
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No.

10

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Frederick A. CooksonName of deceased Nathan Frederick WeddworthAge 83 years 1 months 17 daysPlace of death SouthboroughDate of death May 20, 1943Cause of death Chronic MyocarditisInterment at Waltham Cemetery, WalthamDate permit issued May 22, 1943Certified by Poland Newton M. D.
Westboro

No. 9**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Nathan F. WadsworthIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St. Auburn Cemetery, Hopkinton, Mass.
(Name of cemetery or crematory)on May 22, 1943Certified by Albert E. Boyne, Caretaker
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No.

10

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

W. M. Offutt

Name of deceased

Alice R. Winchester

Age

79

years

—

months

days

Place of death

Highland Hosp. N. C.

Date of death

May 9, 1943

Cause of death

Chronic Myocarditis

Interment at

Rural Cemetery

Date permit issued

June 17 - 1943

Certified by

H. Charman Correll

M. D.

N.C.

No. 11

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to BOARD OF HEALTH
(Office issuing permit)

City or Town of SOUTHBORO Mass.

Name of deceased (Mrs) Alice L. Winchester

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on June 16, 1943.

Certified by J. M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

MRS. GODFREY BRINLEY
SOUTHBOROUGH, MASSACHUSETTS

6/14/43

Dear Mr. Telfer -

I would like to get a
burial permit for Mrs. Manchester's
ashes. I enclose the death certificate.
As I hope to have the burial
tomorrow, I would appreciate
getting the certificate at once -

Yours sincerely

Mrs. Brinley

DEATH CERTIFICATE

Registration No. 11-95
Certificate No. 286

City Asheville County Beacon State N.C.
Name of deceased Alice L. Winchester (ms) Col white Sex Female
Date of birth 1864 Date of death May 9, 1943 Age 79 yrs mos days
Place of death Highland Hopt Former residence Boston, Mass.
Name of father not known Name of mother not known
Cause of death Chronic Myocarditis Physician R. Charman Carroll

I, Mae McFee Registrar of Vital Statistics, Asheville, N.C.
do hereby certify that the above is a true copy of the information
contained in the death record of Alice L. Winchester as filed in
the Asheville Health Department 5/14/43.

Witness my hand and official seal this the 12 day of June 1943

Mae McFee
Registrar of Vital Statistics



OFFICE OF
THE CEMETERY COMMISSIONERS
SOUTHBOROUGH, MASSACHUSETTS

July 5, 1943.

Board of Health
Southboro, Mass.

Gentlemen:

Attn. - Mr. James Telfer

Will you please issue a permit to disinter the remains of Mrs. Hannah T. Kriss from Grave 9, Lot 18, Sec. 13, for the purpose of transferring the same from the Pine Box now in use to a Concrete Vault and reintering in the above named grave,

We have received authorization for this transfer from the representative of the legal custodian of the remains.

Very truly yours,

THE CEMETERY COMMISSIONERS

Walter M. Offutt
By: Walter M. Offutt, Supt.

No. 13

Disinter & Reintering Permit
BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH

to _____

(Office issuing permit)

City or Town of **SOUTHBORO** Mass.

Name of deceased *Hannah T. Kriss*

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on July 8, 1943

Certified by *Walter M. Offutt*
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. 14**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

William E. Wentworth

Age

59

years

1

months

29

days

Place of death

Southboro Mass.

Date of death

July 13, 1943

Cause of death

Chronic Myocarditis

Interment at

Rural Cemetery

Date permit issued

July 15, 1943

Certified by

Walter F. Mahoney
Wentboro

M. D.

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH

to _____

(Office issuing permit)

SOUTHBORO

City or Town of _____ Mass.

Name of deceased William C. KentworthIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on July 15, 1943.Certified by Walter M. Offutt

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. 15**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

Wm M. Tighe

Name of deceased

Andrew W. Fitzgerald

Age

77

years

11

months

✓

days

Place of death

Marlboro Rd Southboro

Date of death

July 23, 1943

Cause of death

Chronic Nephrenchymatous

Interment at

Immaculate Conception ^{Marlboro}

Date permit issued

July 23, 1943

Certified by

C. W. Smith

M. D.

No. 15**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTHto _____
(Office issuing permit)**SOUTHBOROUGH**

City or Town of _____ Mass.

Name of deceased _____

If a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Innocent Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on July 26, 1943Certified by John F. Fletcher
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. _____

16

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Henry A Harpin

Name of deceased

Frank (White) Leblanc

Age

79

years

months

10

days

Place of death

Baker Rest Home Southboro

Date of death

Aug 24 1943

Cause of death

Arterio Sclerosis

Interment at

St Mary's Warburton

Date permit issued

August 24 1943

Certified by

Roland Stewart

M. D.

1943

No.

17

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Vernon E. Merrill

Name of deceased

John C. Stone

Age

71

years

—

months

10

days

Place of death

Baker Rest Home

Southborough, Mass.

Date of death

Aug. 30, 1943

Cause of death

Myocarditis - Chronic

Arterio Sclerosis - Chronic

Interment at

Mount Auburn - Hopkinton
Mass.

Date permit issued

Sept 1, 1943

Certified by

Roland S. Newton

M. D.

No. 1**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTHto _____
(Office issuing permit)**SOUTHBOROUGH**

City or Town of _____ Mass.

Name of deceased John C. StoneIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Myt. Auburn Cemetery, Hopkinton, Mass.
(Name of cemetery or crematory)on September 2, 1943Certified by Albert E. Boyne, Caretaker
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. _____

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Erving H. Harper

Name of deceased

Clara A. Babbitt

Age

68

years

9

months

11

days

Place of death

Southboro, Mass

Date of death

Sept. 26, 1943

Cause of death

*apoplexy cerebral
Arteriosclerosis, obs.*

Interment at

Southboro, Mass.

Date permit issued

Sept. 28, 1943

Certified by

Osland S. Newton

M. D.

No. 18**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to BOARD OF HEALTH
(Office issuing permit)City or Town of SOUTHBORO Mass.Name of deceased Clara A. BabbittIf a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on September 29, 1943.Certified by Walter M. Coffey
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. _____

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

James W. Robbins

Age

59

years

9

months

6

days

Place of death

Boston Road

Date of death

Sept 28, 1943

Cause of death

Para flagia spastic

Interment at

Rural Cemetery

Date permit issued

Sept 29, 1943

Certified by

Roland Newton

M. D.

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTHto _____
(Office issuing permit)**SOUTHBORO**

City or Town of _____ Mass.

Name of deceased James H. RobbinsIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on September 30, 1943Certified by Walter M. Osburn
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. _____

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Elgen J. Rowe

Age

73

years

0

months

23

days

Place of death

Leerfoot Rd

Date of death

Oct 9, 1943

Cause of death

Sudden death, presumably

coronary sclerosis

Interment at

Rural Cemetery

Date permit issued

Oct 11, 1943

Certified by _____

M. D.

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH

to _____

(Office issuing permit)

SOUTHBORO

City or Town of _____ Mass.

Name of deceased Elgen J. RoweIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)on October 12, 1943Certified by Walter M. O'Brien
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No.

21

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

J. Standish Stephenson

Name of deceased

John H. Hughes

Age

73

years

10

months

13

days

Place of death

Southboro -
Lakeside -
St.

Date of death

Oct. 13th 1943

Cause of death

Myocardial Infarction

Interment at

Northboro -
Mass

Date permit issued

Oct 6th 1943

Certified by

M. D.

No. _____

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTHto _____
(Office issuing permit)City or Town of **SOUTHBORO** Mass.Name of deceased John Roug lasIf a U. S. War Veteran, specify what war, organization, etc.

_____**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Howard St. Cemetery, Southbor. Mas
(Name of cemetery or crematory)on October 16, 1943Certified by S. S. Stephenson, Supt.
(Signature of Superintendent, cemetery, or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

22

No. _____

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Cunningham Funeral ServiceName of deceased Annie E. (Quigley) McCloskyAge 71 years 6 months 23 daysPlace of death Fayville Mass.Date of death October 22, 1943Cause of death Heart Disease Arterio
Coronary Disease SclerosisInterment at Rural CemeteryDate permit issued Oct 24, 1943Certified by Roland Newton M. D.

BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH

to _____

(Office issuing permit)

SOUTHBORO

City or Town of _____ Mass.

Name of deceased *Mrs. Annie E. (Quigley) McCloskey*

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on October 25, 1943Certified by Nathaniel M. O'Connell

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

No. _____

23

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to William M. Tighe

Name of deceased Mrs Colista (Pecci) Phillipso

Age 62 years _____ months _____ days

Place of death Southboro Mass.

Date of death November 8, 1943

Cause of death Cerebral hemorrhage

Interment at Rual cemetery Southboro

Date permit issued November 9, 1943

Certified by Walter Mahoney M. D.

No. 23**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH

to _____

(Office issuing permit)

SOUTHBORO

City or Town of _____ Mass.

Name of deceased Colasta (Ricci) Phillips

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)on November 10, 1943.Certified by Halter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

~~1943~~
1948No. 241

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Sumner C. Gage

Name of deceased

Charles O. Misener

Age

78

years

4

months

9

days

Place of death

Winchester, St. Southboro

Date of death

Dec 7 1943

Cause of death

Coronary occlusion

Interment at

Rural Cemetery

Date permit issued

Dec. 9 1943

Certified by

Roland Newberry

M. D.

No. 1 27**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southboro Mass.Name of deceased Charles O. Wisener

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on December 10, 1943.Certified by Walter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 252**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to

John A. Norton

Name of deceased

Harriet Worden Lowell

Age

72

years

— months

— days

Place of death

812 Park Ave Manhattan N.Y.

Date of death

Dec 13, 1943

Cause of death

(?)

Interment at

Burnett Cemetery

Date permit issued

Dec 28 '1943

Certified by

C. W. Lynn (Manhattan N.Y. M.) D.

No. **27154**

DEPARTMENT OF HEALTH OF THE CITY OF NEW YORK

BURIAL—CREMATION—TRANSPORTATION PERMIT

This permit must be handed to the Keeper of the Cemetery or Crematory by the Funeral Director in charge of the funeral.

New York, **DEC 13 1943** 194

The Certificate of Death having been furnished to this Department, as required by the Sanitary Code, permission is hereby given to Walter H. Walbain of 152 - E. 74th St to remove the remains of Harriet Worden Lowell Aged 72 Yrs. Mo. Days, who died at 812 Park Ave Borough of Manhattan City of New York, on DEC 13 1943, 19, from HOME AND STORE Cremation* for Burial* at Burnett Cem on DEC 16 1943 19 Southboro, Mass C. W. LYNN, M. D. M.D.

Assistant Registrar of Records.

* Cross out one.

Per

No. 252**BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Harriet Warden Lowell

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit
was disposed of in accordance with its termsat Burnett Park Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on December 16, 1943Certified by Kalter M. Offutt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.